

**Work Order ID 123038**

Tuesday, July 29, 2014 2:29:03 PM

**\*123038\***

Page 1

Item ID: D3118-5 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Decal 12  
Start Date: 8/29/14 Start Qty: 10.00 **\*10\*** Cust Item ID:  
Required Date: 8/29/14 Req'd Qty: 10.00 **\*10\*** Customer:  
Reference:

Approvals: Process Plan: J.A Date: 14/07/30 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3118	E

100

**\*100\***

Purchasing

Purchasing

PURCHASING

Memo

Issue P/O: 25450  
Manufacture as per dwg D3118Possible Supplier: SRB TECHNOLOGIES  
Supplier P#: 9004001  
Material release note required

Sign should be self-luminous to min. brightness of 160 microlamberts

0.00

0.00

CL 14/00/03 12

110

**\*110\***

Packaging

Packaging

Receive &amp; Inspect for Damage &amp; Mat'l Certs

Memo

Ensure Material Release Note is attached

0.00

0.00

12x 8/14-11-10

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 123038**

Tuesday, July 29, 2014 2:29:03 PM

**\*123038\***

Page 2

Item ID: D3118-5      Accept      **\*N900040100\***      Setup Start **\*NS1\***  
Revision ID:      Stop **\*NS2\***  
Item Name: Decal  
Start Date: 8/29/14      Start Qty: 10.00      **\*10\***      Cust Item ID:  
Required Date: 8/29/14      Req'd Qty: 10.00      **\*10\***      Customer:  
Reference:

Approvals:      Process Plan:      Date:      Tooling:      Date:      Run Start **\*NR1\***  
QC:      Date:      SPC (Y/N):      Date:      Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 <b>*120*</b> QC Quality Control	QC6- Inspect dimensions to drawing  Memo Check dims to dwg and certification attached	0.00  0.00				(12)			DAS 38 9-89 NOV 10 2014
130 <b>*130*</b> Packaging Packaging	Identify as per dwg & Stock Location: <u>81018</u>  Memo	0.00  0.00				Dk			DAS 28 9-89 NOV 10 2014
140 <b>*140*</b> QC Quality Control	QC21- Final Inspection - Work Order Release  Memo	0.00  0.00							14/11/11 <u>MF</u> 14-11-11

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Picklist Print

Tuesday, July 29, 2014 2:29:03 PM

Page 1

Work Order ID: 123038

\*123038\*

Parent Item: D3118-5

\*D3118-5\*

Parent Item Name: Decal

Start Date: 8/29/14

Required Date: 8/29/14

Start Qty: 10.00

Required Qty: 10.00

Comments:

IPP A: 05.05.25 New Issue KJ/JLM

IPP REV:B

12.05.11 AS PER DWG REV.D DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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9004001

Purchased

No

Each

0.0000

\*9004001\*

Sign Assembly

\*\*

10721

10x SP14-11-10

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

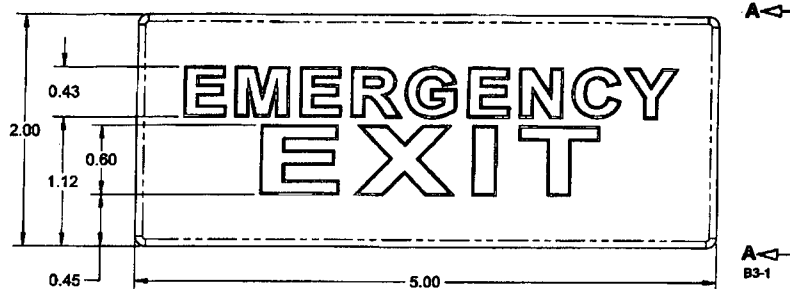
Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td style="width: 33%;">           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </td> <td style="width: 33%;">           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </td> <td style="width: 33%;">           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </td> <td style="width: 33%;">           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </td> </tr> </table>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

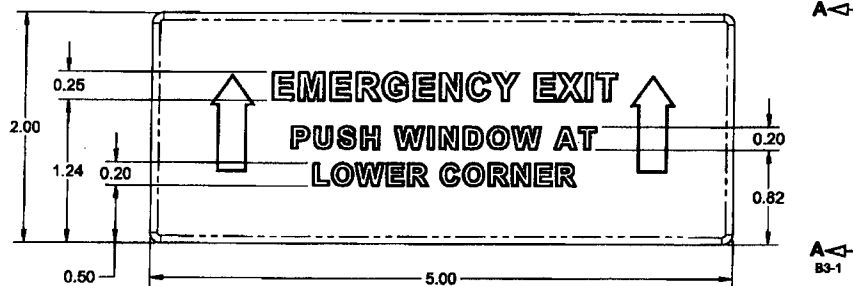
### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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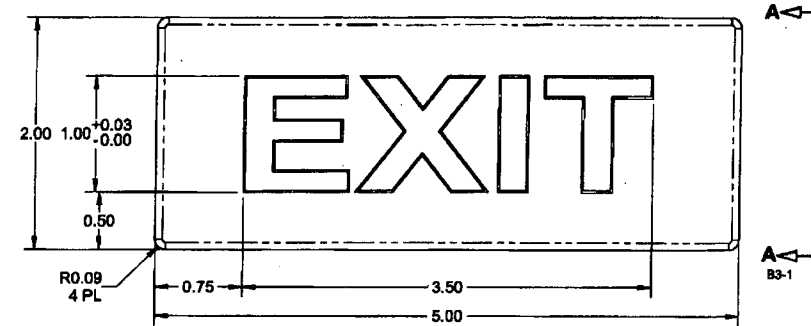
# SPECIFICATION CONTROL DRAWING



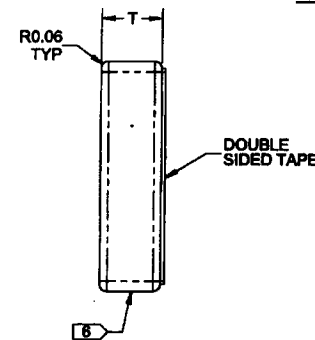
**D3118-1 SIGN ASSEMBLY** [9]  
REPLACES PREMIER P/N 027-57000-01,  
BHT P/N 48860-01008-00



**D3118-3 SIGN ASSEMBLY** [9]  
REPLACES PREMIER P/N 027-57000-03,  
BHT P/N 212-072-637-107



**D3118-5 SIGN ASSEMBLY** [9]



**VIEW A-A** C5-1  
C1-1  
B6-1

RELEASED  
2013-08-01  
MP

J.A 14107130 123038

## NOTES:

- 1) MATERIAL: POLYCARBONATE
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: WITH DART P/N "D3118-X" AND B/N "BXXXX" PER DART QSI 044 6.1
- 7) WEIGHT: 0.30 lbs EACH
- 8) POSSIBLE SUPPLIER: SRB TECHNOLOGIES (CANADA), INC  
320-140 BOUNDARY ROAD  
PEMBROKE, ONTARIO, K8A 6W5  
PHONE: 613-732-0055  
FAX: 613-732-0058
- 9) SEE TABLE FOR SUPPLIER PROCUREMENT P/N'S
- 10) SIGNS SHOULD BE A RED BACKGROUND, CLEAR LETTERING WITH WHITE BORDER AROUND EACH LETTER
- 11) SIGNS SHOULD BE SELF-LUMINOUS TO MINIMUM BRIGHTNESS OF 160 MICROLAMBERTS

DART PART NUMBER	SUPPLIER PART NUMBER	THICKNESS "T"
D3118-1	9004030	0.52
D3118-3	9004043	0.52
D3118-5	9004001	0.66

DESIGN	REV. E	DESCRIPTION	BY	DATE
DRAWN	SFM			
CHECKED	R			
MFG. APPR.	U/P			
APPROVED				
DE APPR.				
DATE	13.07.16			

DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D3118	REV. E
SHEET 1 OF 1	
TITLE SIGN ASSEMBLY	SCALE NTS
COPYRIGHT © 2003 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO25450**

Purchase Order Date 8/20/2014

PO Print Date 8/20/2014

Page Number 1 of 2

**Order From :**

VC-SRB001

SRB TECHNOLOGIES (CANADA), INC.  
320 - 140 BOUNDARY ROAD

PEMBROOKE, ONTARIO K8A 6W5  
CANADA

**Ship To :** DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

Contact Name

Vendor Phone

Ship To Contact

Ship To Phone

Ship Via: FedEx Overnight collect

Ship Acct:

Buyer

Customer POID

Customer Tax # 10127-2607

Terms COD

Currency CAD

FOB FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	9004001  To manufacture as per Drawing D3118 rev.G B123038	Sign Assembly	11/12/2014 Yes 11/12/2014		12.00 Each	\$367.73	\$4,412.76
Line Total:							\$4,412.76
3	71525-40  ***NOTE*** To cover the cost for the following: One time set up charge \$600.00 FAI requirements \$400.00 *****	Set Up/FAI charges	11/20/2014 No 11/20/2014		1.00 Each	\$1,000.00	\$1,000.00
Line Total:							\$1,000.00

80/4-11-10

PO Instructions: Fedex Acc#151793240

Note:

8/20/2014





**SRB TECHNOLOGIES (CANADA) INC.**

320-140 Boundary Road  
Pembroke, Ontario, Canada, K8A 6W5  
Tel.: (613) 732-0055  
Fax: (613) 732-0056  
E-Mail: sales@betalight.com  
Web: www.betalight.com

**CERTIFICATE OF CONFORMANCE****ACCOUNT TO:**

Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON  
Canada K6A 1K7

**CERTIFICATE OF CONFORMANCE ID:**

CDN003128

**YOUR REFERENCE:**

PO25450

**OUR REFERENCE:**

PO25450

**DATE:**

November 6, 2014

ITEM #	PART NUMBER	DESCRIPTION/ SPECIFICATION	QUANTITY	REMARKS/ DELIVERY POSITION
1	9004001 SRBT P/N: 9004001	Sign Assembly T 8.12 Ci. (300.44 GBq)  S/N's: 22879 - 22890  (Ref. FAI# DART-0001)	12	Batch # B25450 (PO25450)  Mfg. November/2014

This is to certify that the whole of the material and/or parts described herein have been manufactured to the quality standards registered under ISO 9001:2008 and conform to the full specification of the appropriate drawings and purchase order requirements.

Test methods for Betalights™ and devices containing Betalights™, including leakage and surface contamination, conform to the British Defence Standard 62-4/4 and/or ANSI/HPS N43.4-2000.

Signed for on behalf of SRB Technologies (Canada) Inc.

  
N. Belleau, Quality Manager

**Form 2: Product Accountability – Raw Material, Specifications and Special Process(s), Functional Testing**

Form 2, 9102 Rev A, Date: Oct 31, 2003

## Form 2: Product Accountability – Raw Material, Specifications and Special Process(s), Functional Testing

Form 2, 9102 Rev A, Date: Oct 31, 2003

**AS/EN/SJAC9102 Rev A First Article Inspection**  
**Form 3: Characteristic Accountability, Verification and Compatibility Evaluation**

<b>1. Part Number</b> D3118-5 SRBT PN 9004001				<b>2. Part Name</b> A/C Sign Assembly		<b>3. Serial Number</b> 22879	<b>4. FAI Report</b> DART-0001
<b>Characteristic Accountability</b>				<b>Inspection / Test Results</b>		<b>Optional Fields</b>	
<b>5. Char No.</b>	<b>6. Reference Location</b>	<b>7. Characteristic Designator</b>	<b>8. Requirement</b>	<b>9. Results</b>	<b>10. Designed Tooling</b>	<b>11. Non-Conformance Number</b>	<b>14. [Insert columns, etc, as required by Organization or Customer]</b>
1	D4	-	2.00" (+/- 0.030")	2.01"	02052971		
2	C2	-	5.00" (+/- 0.030")	5.00"	02052971		
3	C4	-	R0.09 (4 plcs) (+/- 0.030")	3/32	Radius gauge		
4	C4	-	R0.06 TYP (+/- 0.030")	1/16	Radius gauge		
5	C4	-	( T ) 0.66" (+/- 0.030")	0.66"	02052971		
6	D4	-	1.00" (+0.03/-0.00)	1.00	02052971		
7	D4	-	0.50" (+/- 0.030")	0.49"	02052971		
8	C3	-	0.75" (+/- 0.030")	0.76"	02052971		
9	C2	-	3.50" (+/- 0.030")	0.351	02052971		
10	C3	-	Double sided tape	Conform, dbl sided tape on back	Visual, dwg.		
11	Note 1	-	Material – Polycarbonate	Conform, Polycarbonate case & Acrylic lid	BOM, dwg.		Email dated oct 24/14 confirmed acrylic lid acceptable.
12	Note 6	-	Identification; w/ Dart PN and B/N	Conform – ID label applied on bottom edge	Visual, dwg.		
13	Note 7	-	Weight 0.30 lbs	0.25 lbs	scale		
14	Note 10	-	Sign should be red background, clear lettering w/ white border around lettering	Conform, sign red, clear lettering, white border around letters	Visual		
15	Note 11	-	Sign self-luminous with min. brightness, 160 microlamberts (uL)	411 uL	290		
<p align="center"><b>The signature indicates that all characteristics are accounted for; meet drawing requirements or are properly documented for disposition.</b></p>							
<b>12. Prepared By</b> Nathalie Belleau						<b>13. Date</b> November 6, 2014	



Canadian Nuclear  
Safety Commission

Commission canadienne  
de sûreté nucléaire

Canada

## Canadian Nuclear Safety Commission Radiation Safety Data Sheet

This data sheet presents information on radioisotopes only.  
For information on chemical compounds incorporating this radionuclide, see the relevant Material Safety Data Sheet.

### Part 1 - RADIOACTIVE MATERIAL IDENTIFICATION

Chemical Symbol:	H	Common Names:	Tritium
Atomic Weight:	3	Atomic Number:	1

### Part 2 - RADIATION CHARACTERISTICS

Physical Half-Life:	12.35 years
Unconditional Clearance Levels:	Activity Concentration (Bq/g) $1 \times 10^2$
CNSC Exemption Quantity:	Activity Concentration (Bq/g) $1 \times 10^6$ Activity (Bq) $1 \times 10^9$

Principal Emissions	Average Energy of Most Abundant Emission (MeV)	Maximum Energy of Most Abundant Emission (MeV)	Gamma-Ray Dose Rate at 1m Distance (mSv/h per GBq)	Shielding Information <sup>1</sup>
Neutrons	-	-	-	-
Gamma & X-ray	-	-	-	-
Beta* & Electron	0.0057	0.0186	-	Total absorption: <0.1 mm glass or <0.1 mm plastic
Alpha	-	-	-	-

\* Where beta radiation is present, bremsstrahlung radiation will be produced. Shielding for bremsstrahlung radiation must be considered.

<sup>1</sup>Delacroix, D. et al, Radionuclide and Radiation Protection Data Handbook 2002.

Progeny	
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### Part 3 - DETECTION AND MEASUREMENT

#### Method of Detection:

Wipes counted by a beta probe (e.g., wipes counted by a liquid scintillation counter)

#### Dosimetry:

External:	TLD (whole body & skin)	_____	Extremity	_____	Neutron	_____
Internal:	Whole body	_____	Thyroid	_____	Urine analysis	✓ _____

#### Part 4 - PREVENTATIVE MEASURES

Tritium is not a radiation hazard unless it enters the body. Once in the body, tritiated water is uniformly distributed in the body water and can then expose tissue. The dose from inhaled elemental tritium gas is 10,000 times less than that from tritiated water. Tritiated water can be absorbed through the surface of skin, leading to an internal exposure. Gaseous tritium is a fire and explosion hazard when exposed to heat or flame and can react vigorously with oxidizing materials.

Recommended protective clothing: Lab coat and PVC gloves (0.5 mm thick) are preferred because of this material's low permeability to tritiated water. Many tritium compounds readily penetrate gloves and skin. Handle these compounds remotely, wear two pairs of gloves and change the outer layer at least every twenty minutes. Plastic aprons provide added protection especially against tritiated water. Plastic suits may be necessary for work at TBq levels or in an atmosphere contaminated with tritiated water.

Handle tritiated water, gases and volatile liquids in ventilated enclosures. Use glass containers to store tritium compounds because tritiated water and tritiated organic solvents will pass through plastic. Use disposable absorbent liners on trays.

Consult CNSC license for requirements concerning engineering controls, protective equipment, and special storage requirements.

#### Part 5 - ANNUAL LIMIT ON INTAKE

	Ingestion	Inhalation	
Compound Type	Tritiated water	Tritiated water	Elemental tritium gas
Annual Limit on Intake (Bq)	$1.0 \times 10^9$	$1 \times 10^9$	$1.0 \times 10^{13}$

#### EMERGENCY PROCEDURES

The following is a guide for first responders. The following actions, including remediation, should be carried out by qualified individuals. In cases where life threatening injury has resulted, **first** treat the injury, **second** deal with personal decontamination. In the case of an emergency, the Radiation Safety Officer should be contacted as soon as practicable.

##### Personal Decontamination Techniques

- Wash well with soap and water and monitor skin
- Do Not abrade skin, only blot dry
- Decontamination of clothing and surfaces are covered under operating and emergency procedures

##### Spill and Leak Control

- Alert everyone in the area
- Clear area
- Summon Aid

##### Emergency Protective Equipment, Minimum Requirements

- Gloves
- Footwear Covers
- Safety Glasses
- Outer layer or easily removed protective clothing
- Suitable respirator selected

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